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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

ARATION FOR UTILITY OR **DESIGN** PATENT APPLICATION (37 CFR 1.63)

Declaration Submitted With Initial Filing

OR

Declaration Submitted after Initial Filing (surcharge (37 ČFR 1.16 (e)) required)

ond to a collection of information of	unless it contains a valid OMB control number.
Attorney Docket Number	GS 0647 A US
First Named Inventor	Ronald GLAS
COMP	LETE IF KNOWN
Application Number	10/731,890
Filing Date	12/09/2003
Art Unit	
Examiner Name	

	Toquilo	5)						
I hereby declare that:								
Each inventor's residence, ma	iling address, a	and citizenship are a	as stated b	elow next to	their name.			
I believe the inventor(s) name which a patent is sought on the			inventor(s) of the subje	ct matter wh	nich is clain	ned and for	
	APPARATUS FOR DETECTING THE SPEED OF AN ENDLESS TORQUE-TRANSMITTING MEMBER OF A CONTINUOUSLY VARIABLE TRANSMISSION							
		(Title of the	Invention)					
the specification of which								
is attached hereto								
OR			_					
was filed on (MM/DD/Y	YYY)	12/09/2003	as Uni	ted States Ap	plication Nu	umber or P	CT International	
	1		_					
Application Number 10/	731,890	and was amended	I on (MM/E	DD/YYYY)			(if applicable).	
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as								
amended by any amendment	specifically refe	rred to above.						
I acknowledge the duty to di								
continuation-in-part applications, material information which became available between the filing date of the prior application								
and the national or PCT international filing date of the continuation-in-part application.								
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one								
country other than the United States of America, listed below and have also identified below, by checking the box, any foreign								
application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.								
Prior Foreign Application Foreign Filing Date Priority Certified Copy Attached?								
Number(s)	Country	(MM/DD/YY		Not Cla		Yes	No	
102 57 576.2	Germany	12/10/2002						
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Additional foreign applicat	Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.							

[Page 1 of 2]

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to:	Custome	r Number:	2	0676		OR	Corresp	ondence address below
Name						· .		
Alfred J. Mar	ngels							
Address								
4729 Cornell	Road							
City				State				ZIP
Cincinnati					Oh	nio		45241-2433
Country		Telephone				Fax		
U.S.A.		(513) 469	9-0470			(513) 489-0	6030	
I hereby declare that all statem and belief are believed to be statements and the like so mad false statements may jeopardize	true; and fur le are punishat	her that the	nese stat or impriso	ements onment	were, or bo	e made with toth, under 18 t	he kno	wledge that willful false
NAME OF SOLE OR FIRST IN	VENTOR:		Дар	etition l	nas be	en filed for this	s unsign	ed inventor
Given Name						amily Name		
(first and middle [if any])	nald				٥	or Surname	GLA	s
Inventor's	/							Date
Signature (Ma)								7.1.2004
Residence: City	State			Coun	try		Citizer	nship
Achern				Ge	rman	y	Ger	man
Mailing Address Illenauer Allee 7								
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Achern					D-	77855	1	Germany
NAME OF SECOND INVENTO	R:				Ар	etition has bee	n filed fo	or this unsigned inventor
Given Name	· · · · · · · · · · · · · · · · · · ·				Fa	amily Name		
(first and middle [if any])	homas 1				or	Surname	ENDLE	R
Inventor's Signature	Elle							Date 1 09
Residence: City	State			Coun	try		Citizer	nship
Rheinmünster				Germany Germ		German		
Mailing Address Hildmannsfelder Strasse 3	6						Ŷ	
City	State				ZIP		Counti	ry
Rheinmünster					D-7	7836		many
Additional inventors or a legal re	presentative are bei	ng named on t	the s	uppleme	ntal she	et(s) PTO/SB/02A	or 02LR a	attached hereto.

Act of 1995, no persons are requir

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POWER OF ATTORNEY and **CORRESPONDENCE ADDRESS INDICATION FORM**

red to respond to a conection of find	intration unless it displays a valid ONB control number.
Application Number	10/731,890
Filing Date	12/09/2003
First Named Inventor	Ronald GLAS
Title	Apparatus for Detecting the Speed
Art Unit	
Examiner Name	
Attorney Docket Number	GS 0647 S A US

Practitioners associated with the Customer Number: 20676	Practitioners associated with the Customer Number: Practitioner(s) named below: Name							
Practitioner(s) named below: Name	Practitioner(s) named below: Name	I hereby appoint:	г					
Practitioner(s) named below: Name Registration Number Registration Registration Register Registration Register Registration Number Registration Number Registration Register Registration Reg	Practitioner(s) named below: Name	✔ Practitioners associated	with the Customer Number:		206	76		
Address Address Ar29 Cornell Road Address Ar29 Cornell Road Address Ar3469-0470 Fax 513-489-6030 I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) Signature Arms Ard to transact all business in the United States Patent and Trademark Office connected therewith. Registration Number Registration Number Individual Dusiness in the United States Patent and Trademark Office connected therewith. Please recognize or change the correspondence address for the above-identified application to: The address associated with Customer Number: OR Address Ar29 Cornell Road Address Ar29 Cornell Road Address Ar39 Control State Ohio Zip 45241-2433 Country U.S.A. Telephone 513.469-0470 Fax 513-489-6030 I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) SIGNATURE of Applicant or Assignee of Record	Name Registration Number as my/our attomey(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please recognize or change the correspondence address for the above-identified application to: The address associated with the above-mentioned Customer Number: OR The address associated with Customer Number: OR Address City Cincinnati State Ohio Zip 45241-2433 Country U.S.A. Telephone 513-469-0470 Fax 513-489-6030 I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) SIGNATURE of Applicant or Assignee of Record Name Ronald GLAS Signature Z. M. Telephone NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.	OR	L					
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Trademark Office connected therewith. Please recognize or change the correspondence address for the above-identified application to: The address associated with the above-mentioned Customer Number: OR The address associated with Customer Number: OR Firm or Individual Name Alfred J. Mangels Address 4729 Cornell Road Address City Cincinnati State Ohio Zip 45241-2433 Country U.S.A. Telephone 513-469-0470 Fax 513-489-6030 I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) SIGNATURE of Applicant or Assignee of Record Name Ronald GLAS Signature W. Mangels	Trademark Office connected therewith. Please recognize or change the correspondence address for the above-identified application to: The address associated with the above-mentioned Customer Number: OR The address associated with Customer Number: OR Firm or Individual Name Alfred J. Mangels Address 4729 Cornell Road Address 513-489-6030 I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) SIGNATURE of Applicant or Assignee of Record Name Ronald GLAS Signature X. Mangels 7129 Applicant or Assignee of Record NoTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.							
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The address associated with the above-mentioned Customer Number: OR The address associated with Customer Number: OR Firm or Individual Name Alfred J. Mangels Address 4729 Cornell Road Address 4729 Cornell Road Address City Cincinnati State Ohio Zip 45241-2433 Country U.S.A. Telephone 513-469-0470 Fax 513-489-6030 I am the: V Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) SIGNATURE of Applicant or Assignee of Record Name Ronald GLAS Signature V. Head.	The address associated with the above-mentioned Customer Number: OR The address associated with Customer Number: OR Firm or Individual Name	Trademark Office connected the	erewiin.	· · · · · · · · · · · · · · · · · · ·				
The address associated with Customer Number: OR Firm or Individual Name Alfred J. Mangels Address 4729 Cornell Road Address City Cincinnati State Ohio Zip 45241-2433 Country U.S.A. Telephone 513-469-0470 Fax 513-489-6030 I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) SIGNATURE of Applicant or Assignee of Record Name Ronald GLAS Signature V. India	The address associated with Customer Number: OR Firm or Individual Name Alfred J. Mangels Address 4729 Cornell Road Address City Cincinnati State Ohio Zip 45241-2433 Country U.S.A. Telephone 513-469-0470 Fax 513-489-6030 I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) SIGNATURE of Applicant or Assignee of Record Name Ronald GLAS Signature A. Jacob Telephone NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	Please recognize or change the	correspondence address for the	he above-identifie	ed applic	ation to:		
The address associated with Customer Number: OR Firm or Individual Name Alfred J. Mangels Address 4729 Cornell Road Address City Cincinnati State Ohio Zip 45241-2433 Country U.S.A. Telephone 513-469-0470 Fax 513-489-6030 I am the: ✓ Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) SIGNATURE of Applicant or Assignee of Record Name Ronald GLAS Signature V. Had	The address associated with Customer Number: OR Firm or Individual Name	The address associate	ed with the above-mentioned C	ustomer Number				
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Address City Cincinnati Country U.S.A. Telephone 513-469-0470 Fax 513-489-6030 Lam the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) SIGNATURE of Applicant or Assignee of Record Name Ronald GLAS Signature N. Material Materials (Signature Statement under Stateme	Address City Cincinnati Country U.S.A. Telephone 513-469-0470 Fax 513-489-6030 I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) SIGNATURE of Applicant or Assignee of Record Name Ronald GLAS Signature N. Han Date F. 1. 2004 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	Firm or	Alfred J. Mangels					
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Country U.S.A. Telephone 513-469-0470 Fax 513-489-6030 I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) SIGNATURE of Applicant or Assignee of Record Name Ronald GLAS Signature L. Har	Telephone 513-469-0470 Fax 513-489-6030 I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) SIGNATURE of Applicant or Assignee of Record Name Ronald GLAS Signature R. Har Date F. 1. 2004 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	Address						
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Name Ronald GLAS Signature V. Har	Name Ronald GLAS Signature Date 7. 1. 2004 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.							
Signature X. Hay	Signature 2. Ida: Date 7.1.2004 Telephone NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.							
(F) (F) (a)	Date 7.1.2004 Telephone NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	Name Ronald GLAS						
Date 1 2006 Telephone	NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	Signature Z. Mar						
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Application Number	10/731,890
Filing Date	12/09/2003
First Named Inventor	Ronald GLAS
Title	Apparatus for Detecting the Speed
Art Unit	
Examiner Name	
Attorney Docket Number	GS 0647 S A US

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